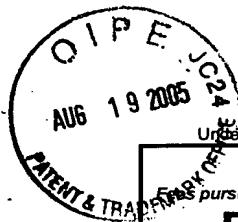


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,360.00)

Complete if Known	
Application Number	09/847091-Conf. #5732
Filing Date	May 1, 2001
First Named Inventor	Eric A. SWANSON
Examiner Name	D. S. Kim
Art Unit	2633
Attorney Docket No.	SYCS-042RCE

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
<u>27</u>	- 28 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
<u>3</u>	- 3 =	x	=	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
		- 100 = /50 (round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for response within third month

570.00

1801 Request for continued examination (RCE) (see 37 ...)

790.00

SUBMITTED BY				
Signature		Registration No. (Attorney/Agent)	42,482	Telephone (617) 227-7400
Name (Print/Type)	Sean D. Detweiler		Date	August 19, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 745889339 US, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 19, 2005

Signature:

(Sean D. Detweiler)



Application No. (if known): 09/847091

Attorney Docket No.: SYCS-042RCE

Certificate of Express Mailing Under 37 CFR 1.10

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MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on August 22, 2005
Date



Signature

Sean D. Detweiler

Typed or printed name of person signing Certificate

42,482
Registration Number, if applicable

(617) 227-7400
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page) w/duplicate copy
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Continued Examination Transmittal (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (8 pages)
Return Receipt Postcard
Charge \$1,360.00 to deposit account 12-0080